

CALIFORNIA HAZARDOUS WASTE MANIFEST

See reverse side for Instructions.
Please type or print clearly. Press Hard.

57368

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number 015-002370

GENERATOR

(Generator Must Complete)

3 Designated TSD Facility (Authorized to operate under an approved state program or federal program)

4 Alternate TSD Facility

SFUND RECORDS CTR
999000896

2 Name

ALUMINUM COMPANY OF AMERICA
VERNON WORKS

Name OPERATING INDUSTRIES, INC.

Name CHEMICAL WASTE MANAGEMENT, INC.

EPA NO.

CAD074126681

EPA NO.

CAD080012024

EPA NO.

CAT000646117

Address 5151 ALCOA AVE. Phone No. 588-6141

Address 900 N. POTRERO GRANDE DR.

Address P.O. BOX 1104, 403 W. ELM AVE

City, State, Zip VERNON CA 90058

City, State, Zip MONTEREY PARK CA

City, State, Zip COALINGA, CA 93210

5

U.S. DOT PROPER SHIPPING NAME

U.S. DOT HAZARD CLASS

UN/NA ID NO.

WEIGHT OR VOLUME

UNITS

CONTAINERS NUMBER:

TYPE: ☐ DRUMS ☐ BAGS ☐ CARTONS
☐ TANK TRUCK ☐ DUMP TRUCK
☐ OTHER

6 WASTE CATEGORY 47 & 48

7 EX. HAZ. WASTE PERMIT NO.

8 GENERATING PROCESS ALUMINUM FABRICATION

LIST COMPONENTS:

CONC. UPPER

RANGE LOWER

UNITS

CONC. UPPER

RANGE LOWER

UNITS

9 A. _____
B. _____
C. _____
D. _____

☐ % ☐ ppm.
☐ % ☐ ppm.
☐ % ☐ ppm.
☐ % ☐ ppm.

E. _____
F. _____
G. _____
☐ % ☐ ppm.
☐ % ☐ ppm.
☐ % ☐ ppm.

Non Hazardous Material _____ %

10 WASTE PROPERTIES: pH 7

☐ Toxic

☐ Flammable

☐ Corrosive/Irritant

☐ Reactive

☐ Sensitizer

☐ Carcinogen/Mutagen

11 PHYSICAL STATE: ☐ Solid

☒ Liquid

☒ Sludge

☐ Slurry

☐ Gas

☒ Other

WATER & OIL SLUDGE

12 SPECIAL HANDLING INSTRUCTIONS:

☐ Gloves

☐ Goggles

☐ Respirator

☐ Other

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

13

Signature of Authorized Agent and Title

81-05-02

Date Shipped

TRANSPORTER

(HAULER MUST COMPLETE)

14 NAME

ASBURY OIL CO.

EPA NO.

CAD028277036

ADDRESS 13419 Halldale Avenue PHONE NO. (213) 321-1392

CITY, STATE, ZIP Gardena, California 90249

15 PICK-UP DATE

TIME ☐ AM ☐ PM

16

Signature of Authorized Agent and Title

Date

TSD FACILITY

(FACILITY-OPERATOR MUST COMPLETE)

17 NAME

OPERATING IND

18 QUANTITY (If Measured) 100000

EPA NO.

CAT080012024

19 STATE FEE (If Any) 17.50

PHONE NO.

20 INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:

IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:

22 NAME

EPA NO.

23

Signature of Authorized Agent and Title

Date Accepted

ORIGINAL